



Evaluating the ac.care Generic Homelessness Service programs in Mt Gambier: (Limestone Coast Homelessness Service) Final report



Authors:

Dr Yvonne Parry
Flinders University
Faculty of Health Sciences
School of Nursing and Midwifery
Email: yvonne.parry@flinders.edu.au
Phone: 8201 3354

Ms Shelly Abbott
Flinders University
Faculty of Health Sciences
School of Nursing and Midwifery
Email: shelly.abbott@flinders.edu.au
Phone: 8201 2126

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Section one

Introduction

ac.care Limestone Coast Generic

Homelessness Service programs

The research based evaluation of the programs provided by the ac.care *Limestone Coast Generic Homelessness Service programs* is presented here. This report is divided into five sections. The first section presents the background information on the ac.care *Limestone Coast Generic Homelessness Service* initiative including: the aims of the program, an outline

of the services provided, demographic area, definitions of homelessness, and the aims of the program. The second section provides the outline of some of the theoretical basis for the models of care and the therapeutic models of care that are common in all the programs provided. Subsequent sections provide the therapeutic models of care specific to the particular program provided by the organisation or service. The result section outlines the key sources of data and the analysis findings. The report also provides a conclusion for each program and a final conclusion for the evaluation research project as a whole.

Background

Homelessness often occurs from the culmination of several life factors including unemployment, poverty, and family breakdown, and can be defined as 'inadequate access to safe and secure housing' that results in: damage to the person's health; threats to the person's safety; marginalisation of the person minimising access to personal amenities, economic participation and social support; or places the person at risk of safe, secure, adequate and affordable housing (Baldry et al 2013, Homelessness Australia 2014). Unemployment, poverty and the inability to afford adequate housing are central to the causes of homelessness (Baldry et al 2013, Homelessness Australia 2014). Further, the homeless are socially isolated and living on the margins of society prior to periods of homelessness (Baldry et al 2013, Homelessness Australia 2014). Additionally, homelessness impacts the disenfranchised (Baldry et al 2013, Homelessness Australia 2014, Young 1992) and vulnerable, for example, although aboriginal people compose only 2% of the Australian population they make up 20% of those receiving housing assistance or in homeless population (Human Rights & Equal Opportunity Commission 2008).

Service background: Limestone Coast Generic

Homelessness Service

The Limestone Coast Generic Homelessness Service is a regional homelessness gateway and service hub, which facilitates a combination of on-site, community-based outreach and in-home support. The Limestone Coast

Generic Homelessness Service professional staff are available during business hours to assist people who may be

- Homeless
- At risk of losing their tenancy
- Residing in a boarding house
- On a wait list for accommodation

Limestone Coast Generic Homelessness Service is funded to provide a generic homelessness service and as such welcomes single people, couples and families, who are homeless or at risk of homelessness. In addition, if Limestone Coast Generic Homelessness Service cannot assist, or more targeted and specific services are required, then Limestone Coast Generic Homelessness Service will refer on to a more specialised homelessness service.

Who can access the service?

Homelessness rarely occurs suddenly, or through a life choice but rather through a set of accumulative life circumstances, such as unemployment and the resulting inability to pay bills (Government of South Australia 2013). The service aids people, couples and families, who are homeless or at imminent risk of homelessness; to achieve the maximum possible degree of self-reliance and independence, to assist in resolving crises, and to re-establish a capacity to live independently of a specialist homeless service.

Services

- Support for people in crisis and without accommodation
- Support for people already in accommodation but at risk of losing their tenancy
- Holistic support including family counselling, financial counselling, alcohol and other drugs counselling
- Advocacy for supported clients
- Provision of a postal address

Charter for Homeless Rights and Responsibilities

Community housing and homeless support agencies have their own charter of rights and responsibilities. The charter establishes rights and responsibilities for

people using managed homelessness assistance or social housing services funded through the Department of Human Services. The rights and responsibilities include:

- The right to assistance during a crisis or to prevent a crisis
- The right to be considered for accommodation and housing based on fair policies
- The right to receive help finding and staying in suitable housing on a long term basis
- The responsibility to respect the rights of others to feel safe
- The right to feel free from discrimination
- The right to respect for your culture
- The responsibility to respect the cultural backgrounds and privacy of others
- The right to respect, dignity and privacy
- The right to participate in the decision making process of organisations
- The right to help applying for income support, employment, health services, educational opportunities and other support services, and
- the right to make a complaint or appeal a decision you do not agree with and receive an answer that that makes sense to you

UN Convention on the Rights of the Child

The use of an internationally ratified convention is important to ensuring that the service provided is cognisant of the rights of the disadvantaged and vulnerable populations using the service. The Limestone Coast, Generic Homelessness Service abides by the UN Convention on the Rights of the Child. A copy of these rights is listed on the staff notice board in the team working area. This provides ready access to the framework informing the practice of the staff working with homeless clients. Homelessness is often defined using the following categories. These are by no means exclusively bounded but rather a guiding definition.

Primary Homelessness

People without conventional accommodation, including people sleeping rough, living on the streets and in other public spaces such as parks, squatting in buildings or using vehicles, for temporary shelter.

Secondary Homelessness

People staying in emergency or transitional accommodation (including where provided by governments and non-government organisations) and people residing temporarily in other households because they have no accommodation of their own. It also includes people residing temporarily in boarding houses for 12 weeks or less.

Tertiary Homelessness

People living in boarding houses on a medium to long term basis for over 12 weeks.

Service Provision Principles

The service objectives will be achieved through adherence to a set of service principles as follows:

- Service delivery that is client focused, based on a housing first approach and with no exits to homelessness;
- A service as a gateway to a broader homelessness and mainstream support sector;
- Service delivery that is flexible and responsive to client needs including, timely intervention to minimise ongoing dependency and maximise client's independence;
- Service provision based on transparent eligibility, intake and assessment processes;
- Service provision that prioritises people in primary, secondary and tertiary homelessness and with high complex needs;
- Formal National Affordable Housing Agreement (NAHA) case management and case work as the foundation for interventions on behalf of clients;
- Accompanying children recognised as clients in their own right;

- Service provision that encourages and supports healthy lifestyles;
- Participation in the homelessness to home (H2H) case management system;
- Provision of data (quantitative and qualitative) as required under national and state reporting requirements;
- Participation in regional partnerships;
- The provision of formal training and development to service staff and volunteers to enhance effective and ethical practice;
- Services based on Iga Warta principals to improve Aboriginal outcomes

Eligibility for the Limestone Coast Generic Homelessness Service

The Limestone Coast Generic Homelessness Service Housing Program operates across the Local Government Areas of City of Mt Gambier, and the surrounding regional areas, however, is not restricted to providing services to clients residing in these council areas, as services are available to all individuals based on their assessment needs. The Limestone Coast Homelessness Service recognises that assistance is available to all within this region that are:

- Experiencing housing crisis
- Experiencing housing stress
- Homeless
- In crisis support accommodation
- Facing eviction and homelessness and
- Escaping family violence.

Where eligible persons cannot be assisted because of a lack of available resources, Limestone Coast Generic Homelessness Service workers will make their best endeavours to refer to other appropriate sources of assistance.

Gateway service - Who can access the service?

ac.care Limestone Coast Generic Homelessness Service is a generic service which has the capacity to engage and intervene effectively on behalf of homeless people, couples and families, or those at risk of homelessness. All frontline services are gateways in their own right to homelessness and broader human services. The South Australian Homelessness Implementation Plan

provides an outline of 69 initiatives, of which 67 include direct services provision to individuals and families who are homeless or at risk of homelessness. Of the two exceptions, initiative 68 maintains a focus on training and workforce development activities that are crucial to sustaining professional practice and initiative 69 supports sector consultation and strategic planning (SA Project Plan 2014).

Therefore, all people, couples and families, who present will be considered clients of the ac.care Limestone Coast Generic Homelessness Service, and will be assessed to identify their presenting crisis and longer term needs. The service has been established to help all people who are homeless or at imminent risk of homelessness achieve the maximum possible degree of self-reliance and independence through the provision of holistic, supportive and referral processes. The services provided can consist of those outlined below.

Service provision

- Support for people in crisis and without accommodation
- Support for people at risk of losing their tenancy
- Holistic support including family counselling, financial counselling, alcohol and other drugs counselling
 - Referrals
 - Support with appointments
 - Support meeting therapy goals
- Emergency Assistance
- Advocacy
- Removal Assistance
- Financial guidance, debt management and debt support
- Parenting skills and links to school and kindy
- Mental health referrals and service support
 - E.g. support with attending appointments
- Employment preparation and skill development through the Tenancy Education and Development (TED) program
 - Personal makeover, e.g. haircut, makeup and beard trim, through a local business to improve self-care and appearance

- Gift voucher for attending the TED program
- Clothing
- Weekly home visiting program
- Day to day activities, such as, role modelling house cleaning, household task management, menu planning, and budgeting.

The list provided above is by no means exhaustive but rather an indicative outline of some of the services provided. Each client is assessed and provided with support provided that is individualised and focused on meeting client needs. The determination of the needs of each client is managed through an intake and assessment process where the client is assigned a case worker.

Summary of ac.care Limestone Coast Generic Homelessness Service

ac.care Limestone Coast Generic Homelessness Service addresses the needs of homeless children, youth, and adults. Accordingly, ac.care Limestone Coast Generic Homelessness Service program was established in 2004. The established service network provides a relatively uniform suite of services across the southern region of South Australia to meet the needs of:

- Women and children escaping domestic and family violence
- Youth specific crisis and support services for young people between the ages of 15 and 25 years.
- Generic homelessness services for adults, couples and families
- Aboriginal specific services across domestic violence, youth and generic categories – where data indicates these are most required.

Within individual service contracts, key service elements are identified to ensure outcomes are met. These elements may be general or more specific depending on the focus of each service, regional need and service profiles.

Therefore, the ac.care Limestone Coast Generic Homelessness Service program aims to address the risk of deleterious outcomes of homelessness on individuals, families and the community before they escalate, and to help individuals, families and the community to provide a safe alternative to sleeping rough. Thus circumvent the deleterious health, education and welfare outcomes for homeless people.

Aims of the Limestone Coast Generic Homelessness Service

The aim of the program is to transition clients out of homelessness and into employment, housing and supported services thereby facilitating their participation in the broader society. The service aims to address the risk of deleterious outcomes of homelessness on individuals, families and the community before they escalate, and to help individuals, families and the community to provide safe alternatives to couch surfing and sleeping rough. Thus circumvent the deleterious health, education and welfare outcomes for homeless people. The Limestone Coast Generic Homelessness Service has an innovative program that provides a holistic wrap around service that addresses more than the house needs of clients. This is in accordance with the latest international research findings described in section two below.

Target populations of the Limestone Coast Generic Homelessness Service

The service and its programs target all age groups who are at risk of homelessness. This includes families and individuals regardless of background and complex needs.

Our clients

The researchers Parry and Abbott were approached by ac.care Limestone Coast Generic Homelessness Service to provide a research evaluation of the programs and support provided. As described previously supported interventions for the people experiencing homelessness are more successful in preventing longer term human and societal costs of homelessness (Baldry et al 2013, Homelessness Australia 2014). Research shows that children living in homelessness and poverty are exposed to higher levels of stress and this interferes with their ability to learn and meet developmental milestones (Parry et al 2016, Margolin and Gordis 2004, Suor et al 2015). Therefore, programs that assist individuals and families to cope with homelessness can decrease the percentage of children and adults experiencing stress (Baldry et al 2013, Homelessness Australia 2014).





GIVING BACK: ac care homeless service manager Trish Sparris, EON Property's Christine Huford and Support Homeless People luncheon committee member and ac care media and communications manager Anne Hindy-Tyler hold one of several bags which were donated by EON Property in the lead-up to next month's fundraising luncheon. Picture: CAITLIN KENNEDY

Section two

Literature review

The literature review

The literature review is the foundation of any research evaluation (Patton 2010). The literature review provides an understanding of the area within it's contextual frameworks. Additionally, the literature review justifies the basis of the evaluation process, knowledge of the area under investigation and the linking of the findings and results to the services offered. A scoping review process was used as it is effective for investigating areas of complex need (Parry et al 2016). Therefore, the literature review underpins all other sections of this report.

Section two illustrates the use of targeted housing programs and the importance in providing programs that are not restricted to housing only. International research has found that housing only focused programs do not provide sustainable long term outcomes that improve human and societal outcomes for people experiencing homelessness (Baldry et al 2013,

Homelessness Australia 2014). Responses to homelessness need to provide a whole of community and holistic approach to intervention. The Limestone Coast Generic Homelessness Service provides comprehensive evidence based homelessness interventions and support for people experiencing homelessness.

Targeted housing programs

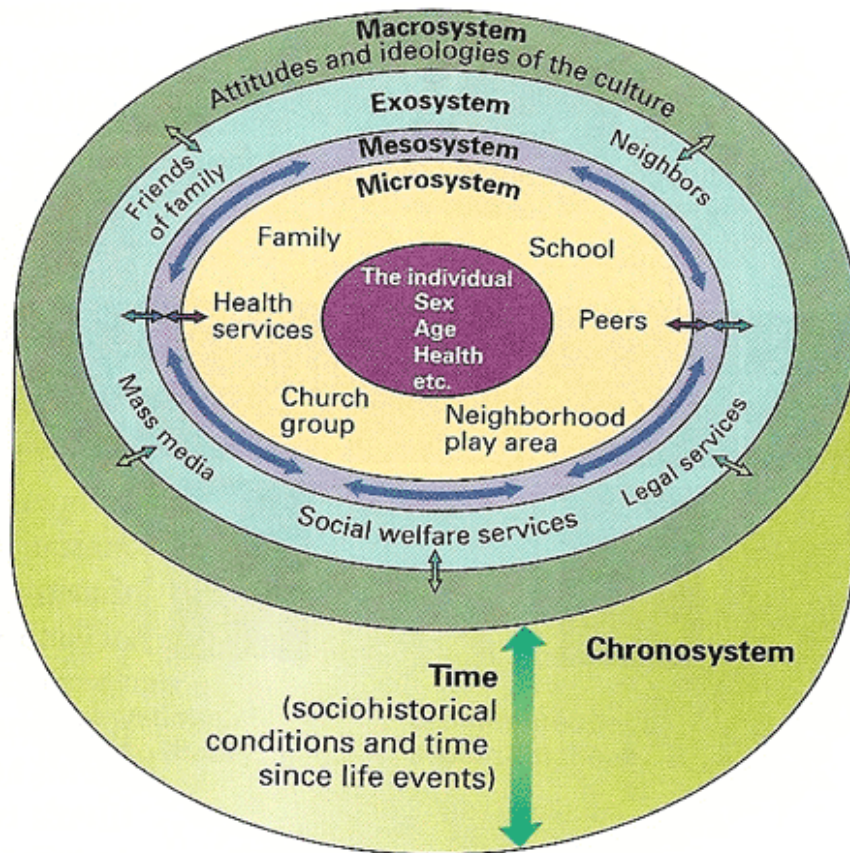
Early human development impacts on health, learning, and behaviour throughout life (Coren et al 2013). Homelessness impacts directly on development and life-course outcomes (Parry et al 2013, McCoy et al 2012, Baldry et al 2012). Recent research in Australia has found that homelessness has a social, economic and human cost across the lifespan (Baldry et al 2012). The use of targeted programs that effectively intervene and directly target the multiple and complex needs of the clients through homeless services can substantially decrease comorbidities and the costs of homelessness (Parry et al 2013, McCoy et al 2012, Baldry et al 2012). For example, research by Baldry et al (2012) found the cost of homelessness was \$960,000 per person with 2/3rd of the costs spent on the justice system while 1/3rd on housing, welfare, health and disability services. This study highlighted the paramount importance of early interventions in childhood to prevent the human and economic costs later in life (Baldry et al 2012). Additionally, internationally researchers have found the interventions that address and target the complex needs of the clients are more effective in minimising the impact of homelessness than housing only focused interventions (Tsemberis et al 2012).

Programs targeting homelessness need to be cognisant of the broader societal impacts on homelessness. For example, unemployment or under employment, low wages, labour migration, housing availability and affordability (Baldry et al 2013, Homelessness Australia 2014). Whilst these powerful social influences are indicative of the complex phenomenon of homelessness; the homelessness sector programs do not address these characteristics. Rather the most prevailing influences on homelessness remain in the remit of the governments (Baldry et al 2013, Homelessness Australia 2014). These aspects influencing

homelessness necessitates a broader response to homelessness rather than housing only, therefore, a holistic response to homelessness is required.

The Limestone Coast Generic Homelessness Service provides a holistic approach based on theoretical models, such as Bronfenbrenner's illustrated in Figure 2.1 below. Bronfenbrenner's theoretical framework provides a more effective, boarder view on the impact of societal pressures on vulnerable population groups, than singularly based programs. The basing of programs with theoretical underpinnings, such as Bronfenbrenner's helps to ensure that the deleterious outcomes on, for example, healthy child development, are addressed (Reynolds et al 2011). The Limestone Coast Generic Homelessness Service provides early intervention, therefore, is an investment in a country's future workforce and capacity to thrive economically and as a society (Reynolds et al 2011, Sawyer et al 2014). Figure 2.1 below illustrates the interconnections between health, welfare, and the community. Therefore, using Bronfenbrenner's foundational framework provides not only a model of interventions but also a philosophical underpinning. For example, that: the causes of homelessness are complex and multiple, homelessness is not a lifestyle choice but rather results from unexpected and accumulative life circumstances, such as unemployment. Consequently, Figure 2.1 below provides an overview of the theory and illustrates the interconnected and intertwined nature of human development and life circumstances.

Figure 2.1 Bronfenbrenner bioecological model of development places the individual at the centre and highlights the social influences on the individual.



Supporting individuals and families through community based programs is soundly theoretically based as figure 2.1 is based on the bioecological theory of development (Sawyer et al 2014). The Limestone Coast Generic Homelessness Service programs target the most vulnerable and disadvantaged members in society, with the goals of reducing risk factors and improving individual and family functioning and wellbeing. An evaluation of the programs efficacy is necessary in order to ensure funds have been well spent and to secure continued funding and expansion of such programs. The use of Bronfenbrenner's model and philosophical foundations provides a response to homelessness that is comprehensive and inclusive of the complex causes of homelessness.

Supportive housing

Recent research has identified the social financial costs of homelessness (Bentley et al 2016, Parsell 2016). Governments can save at least A\$14,329 in health and criminal justice cost by providing supportive housing (Parsell 2016). These savings are on top of the savings in mental health and hospital avoidance costs (Bentley, Reeves and Baker 2016). Living in sustained housing reduces; mental health service use by 65%, criminal offending by 52%, being a victim of crime by 54%, time in custody by 40% and crisis accommodation use by 99% (Parsell 2016). This provides substantial savings for the state and federal governments providing these services (Bentley et al 2016, Parsell 2016). Therefore, providing services that effectively address the multiple and complex issues of the people experiencing homelessness, such as those provided by ac.care Limestone Coast Generic Homelessness Service can save State and Federal governments substantial costs. The initial intake and assessment information provided by clients informs the comprehensive interventions that address the client specific antecedence into homelessness. These practices are reflective of the philosophical stance of 'supported housing'. Additionally, homelessness is a known social determinant of health and impacts directly on a persons capacity to maintain their health (Marmot and Wilkinson 2010).

Housing as a social determinant of health (SDH)

The health of a person is determined within the context of the environments in which they are born, grow, live, play, and learn (Mustard 2010, Krieger 2001, Marmot and Wilkinson 2010, Parry et al 2016). A range of determinants have been identified that shape the health of children and families (Mustard 2010, Krieger 2001, Marmot and Wilkinson 2010, Parry et al 2016). These include education, housing, employment, health access, income, gender and social processes, such as social support and social exclusion, and are coined the Social Determinants of Health (SDH) (Mustard 2010, Krieger 2001, Marmot and Wilkinson 2010, Parry 2012). As such the SDH are the aspects of people's lives in which they are born, grow, live, work, and age (Parry 2012). This definition incorporates a variety of factors that impact on children and influence their adult health status. The SDH represent a broad array of characteristics that are not

biological or genetic but result from the social, physical, and community environments (Parry 2012).

The social determinants of health (SDH) are recognised as measures of individual and structural characteristics that can be addressed to assist families and communities to move away from vulnerability (Parry 2012, Mustard 2010, Krieger 2001, Marmot and Wilkinson 2010, Parry et al 2016, Shonkoff and Garner 2011, Sinclair 2014, Wilkinson and Pickett 2004 & 2009). The concepts that define the SDH enable research into the broad processes and management of society's which directly influences health outcomes. Significantly, these concepts provide a means of understanding differences in health outcomes for different population groups (Parry 2012, Mustard 2010, Krieger 2001, Marmot and Wilkinson 2010, Parry et al 2016, Shonkoff and Garner 2011, Sinclair 2014, Wilkinson and Pickett 2004 & 2009).

Additionally, the Social Determinants of Health (SDH) provides a framework for exploring health inequities against services that provide supported, wrap around, models of care and intervention, which deliver individual support across a broad range of determinants of health through links with community health, education and welfare services (Parry 2012). As the programs that promote the community based delivery ethos then using the SDH measurements could also highlight the impact of these programs on the community.

ac.care Limestone Coast Generic Homelessness Service programs

Aims and goals of the service programs

Programs targeting homeless individuals and families aim to decrease the impact of homelessness and address the individual's potential level of complex vulnerabilities that accumulate to produce poorer adult health outcomes (Baldry et al 2012, Bentley et al 2016, Coren et al 2013, Department for Education UK 2011, Embleton et al 2013, Gibson and Johnstone 2010). ac.care Limestone

Coast Generic Homelessness Service provides early intervention and prevention programs, to target the most vulnerable and disadvantaged members in society, with the goal of reducing risk factors and improving individual and family functioning and wellbeing. As noted above these aims and goals are supported by the literature on responding to homelessness and effective early intervention.

This report details research that aimed to explore the relationship between ac.care Limestone Coast Generic Homelessness Service programs delivered in Mt Gambier and districts and the social determinants of health for the individuals and families who have used the service. Whilst such programs appear sound from a theoretical perspective, unless there is evidence of the outcomes of the program, the work cannot be validated. This type of analysis and research provides the bridge between policy objectives and the practice applications of policy. This research provided the next keystone step in examining the broader impact of individually tailored programs.

Aim and objectives of the evaluation research

The research evaluated the ac.care Limestone Coast Generic Homelessness Service programs that were delivered to at risk individuals and families in Mt Gambier.

AIM OF THE EVALUATION RESEARCH

To explore the relationship between ac.care Limestone Coast, Southern Country Generic Homelessness Service programs delivered in Mt Gambier and the social determinants of health for the children and families who have used the service.

OBJECTIVES OF THE EVALUATION RESEARCH

1. To identify the impact of the program on the individuals and families using the service
2. To assess the relationships between the services provided and the changes to the participants housing (and some aspects of wellbeing) needs and access.

3. To develop a set of recommendations that would enhance the programs' capacity to improve the services delivered to this population group.

These objectives represent the first step in determining the extent to which the ac.care Limestone Coast Generic Homelessness Service programs impact on the individuals and families using the service and influence subsequent broader social outcomes.

Approach to research (methods)

This research project was undertaken in two stages. The first stage involved:

1. A literature review explored the areas of program evidence in the area along with the theoretical and evidence basis for the programs provided.
2. The themes, theoretical background and methodological approaches are derived from the literature review and used to determine the extent to which the programs adhered to the latest evidence.
3. The literature also provided a process of comparison of the programs and referrals provided by ac.care Mt Gambier against the national and international research ensuring the robustness of the research process.

Stage two included:

1. The use of interviews from several key sources, such as providers of external support services, staff, people using the ac.care Limestone Coast homelessness service.
2. A thematic analysis to provide an in-depth understanding of the impact of these programs on the outcomes of the individuals and families using the service.

Methodology

Qualitative data and analysis

Qualitative data provides in-depth responses to life events and are imperative here in understanding the impact of homelessness on individuals and families. Homelessness represents a critical life event. The responses of the ac.care Limestone Coast homelessness service to critical life events can underpin the

extent to which individuals and families are assisted to move out of homelessness.

Implications arising from the critical event

The negative or positive consequences arising from the complications caused by the critical event may have ongoing implications. Narratives people derive from events inform self-belief and expectations for future events, both at an individual level for themselves and at a social level for their expectations of society (Kohler Riessman 1993, Lieblich et al. 1998, Czarniawska 2004, Daiute & Lightfoot 2004, Duffy 2008). Homelessness can have further implications for the family that could include; at a self-belief level, not being able to provide care for their children; or at a societal level, that local services are not available to them when they need them.

Meanings and actions assigned to the events

Homelessness has a complex impact on individuals and families which incur meanings. These refer to the meaning attributed by the participants to the particular events and the role these meanings play in future decisions to seek help, such as health care. The meanings then also guide subsequent actions regarding housing access, employment readiness, health care and its access. The actions of the participants and their child/children inform decisions regarding, for example, health, and the type of health care they access. A process of construction hereafter determines the patterns of health access. For those people experiencing homelessness the patterns of seeking assistance to address homelessness are therefore impacted by the meanings attributed to that event.

The result or outcome of the event

The result or outcome of the event is the combination of the above that has implications far beyond the event. It may inform later housing and homelessness issues. The interpretations of the critical event inform self-belief, the individual's capacity for self-direction, and ideas regarding the services and support available in our society. Thus, the results or outcomes of a critical event

may influence patterns of future homelessness, housing access, and support seeking behaviours.

Thematic analysis's of the narratives provides the opportunity to gain in-depth information on events or circumstances within a person's life that has significance to them. The narratives collected can substantiate each other providing common themes. One of the underlying motives for using narratives is to examine the depth such data provides and apply what is learnt from a few to many, to gain substance for the literature, qualitative data, and to make theoretical assumptions through the method and triangulation of the information collected to reinforce the research process.

Social and power implications of the thematic analysis of narratives

Researchers have found the use of narrative analysis important in discovering the underlying socio-political impacts on population groups (Kohler Riessman 1993, Lieblich et al. 1998, Czarniawska 2004, Daiute & Lightfoot 2004). As Kohler Riessman (1993) notes:

The use of narratives [and thematic analysis] is important as all narratives are socially constructed and laced with social discourse and power relations (Kohler Riessman 1993 p. 65).

As such narratives provide a useful insight into the social and power relations that influence the participant's decisions. In this research the in-depth interviews are used to link the individual's and family's experiences of homelessness with the outcomes of the programs provide by ac.care Limestone Coast homelessness service.

The qualitative data was derived from multiple sources thereby ensuring comprehensive views from multiple perspectives that enhances the robustness of the themes. For example, the qualitative data in the ac.care Limestone Coast Generic Homelessness Service was of good quality and consistent with international standards on the use of the qualitative collection processes provided to participants, staff and external providers of the program. Further, the analysis performed on the data was consistent with approximate data analyses technique for the data provided (Foster et al 2015). In-depth

information regarding issues that influence choices on many aspects of an individual's and family life that can be addressed through in-depth interviews or other qualitative approaches. This is addressed by the inclusion of narratives that allow families to express how homelessness impacts on their children and families and the support provided by ac.care Limestone Coast Generic Homelessness Service.

Qualitative Methodology

The qualitative component of the study was undertaken within a broad framework of critical social theory. This enabled the researchers to consider multiple positions, such as gender, race and poverty as they affect the homelessness outcomes of individuals and families. Importantly, it situates the research as inquiry to inform change.

The subjective nature of qualitative enquiry has a number of relatively stable criticisms. The qualitative researcher selectively collects and analyses data that is not representative (Bogdan and Taylor 1975). Generalisations are consequently not appropriate. Qualitative enquiry is only appropriate as a research design where an in-depth understanding is required of a group of people who have been purposefully selected (Patton 1990). Here the data selected specifically explores the outcomes of the ac.care Limestone Coast Generic Homelessness Service programs on the individuals and families using the service.

Data Management and Analysis

All copies of transcripts and any other pertinent qualitative and quantitative data sets are kept in a locked cabinet at Flinders University for seven years and then destroyed to comply with A.F.I. legislation.

Qualitative data management and analysis were completed in two separate but related steps in a procedure recommended by Patton (1990). The recordings were transcribed verbatim and pseudonyms assigned as the initial step to managing and analysing the data. The pseudonyms maintain anonymity and confidentiality. Therefore, due to the rural setting and small community involved

any data provided in the findings section will not include demographic or designation information, for example, staff or participant.

Qualitative data was analysed manually. Transcripts were disseminated into their component parts with reference to the original question categories. Respondent selections were separated and colour coded in a procedure outlined by Cavana et al (2001). Care was taken at this point as all data taken at the first instance as relevant and useful. There was a need to carefully identify statements that were made by the participants on issues that were not core to the focus of study, yet remained important, and those statements that were more clearly relevant.

The data was then inductively analysed. Patton (1990, p.306) describes inductive analysis as patterns, themes and categories of analysis come from the data; they emerge out of the data rather than being imposed on them prior to data collection and analysis. Themes that emerged from the data were analysed in terms of the constant comparative method as described by Glaser and Strauss (1967). This method requires that themes be examined as they emerge directly from the raw data and compared to each other to ensure they are not different aspects of a previously designated theme (Cavana et al 2001, Glaser and Strauss 1967).

Marshall and Rossman (1999) note that an alternate understanding will always exist and the job of the researcher is to argue and reason why the explanation associated with the data is a better explanation than the alternate understanding. Patton (1990) warns that researchers are always at risk of being accused of imposing an understanding that reflects the researcher's world better than the world being studied. The search for alternate understandings was considered and one method that could be used was to counter this accusation.

Selection of participants

The use of multiple sources of information and informants enhances the validity and robustness of the findings (Parry and Willis 2013). Therefore, selecting the

participants in the qualitative phase consisted of an evaluation of their provision or use of the programs which then resulted in their inclusion due to their key informant status. Furthermore, the managers of the programs provided important theoretical knowledge and background on program development and implementation.

Interview questions

Questions asked were open ended and simple in structure to elicit the participant's in-depth responses and to obtain responses unconnected with the researcher's experience or bias. The interviews with participants from the services, staff, referral and community services, and clients, covered several characteristics highlighted by the quantitative evaluation:

- The type of program;
- The usefulness of the program;
- The impact of the program[s] on other aspects of the participants lives (e.g. the mental health, drug use);
- Implications for changes;
- Impact on health (mental and physical);

The above considerations were used as a guide for the design of the open-ended questions. The initial data collection took place in the southern rural region of South Australia over seven months.

Community engagement strategies

A research reference group was established from the various agencies delivering the ac.care Limestone Coast Generic Homelessness Service programs. This enabled the collaborative involvement of the service providers into the research process ensuring the final recommendations are usable. The research reference group verified the variables definitions for stage one and assist in the development of the qualitative questions for stage two interviews.

The researchers analysed all the interview responses. The analysis was presented to the reference group for consideration and comment. The results

of the first two phases informed the development of a set of recommendations for future service delivery of interventions of children at risk and their families. As well as provide a framework for future service evaluations and data collection. These could be used to ensure the effectiveness and viability of the ac.care Limestone Coast Generic Homelessness Service programs using an evidenced based perspective.

Economic rationale / Social return on investment

The Ac.care Limestone Coast Generic Homelessness Service intensive and comprehensive support for homeless adults and their children. Additionally, the program was assessed using the literature and FTE data for its effectiveness from an economic view point. Research of Baldry et al (2012) highlighted the impact of unaddressed homelessness from a human and social cost perspective. From a society, tax payer cost, homelessness was \$2.2 million per person (Baldry et al 2012). The human cost was complex, and involved aspects of disenfranchisement, exclusion based deprivation, and poverty (Baldry et al 2012). From this view point the funds spent providing services and programs in the ac.care Limestone Coast Generic Homelessness Service are cost effective. The use of early assessment, client focused case management and goal setting, prevention and intervention programs for homeless individuals and families has the potential to save public expenditure. The following section provides further evidence of the theoretical underpinnings of the programs and interventions provided by the ac.care Limestone Coast Generic Homelessness Service.





Section three:

Theoretical background and underpinning of the programs offered by ac.care Limestone Coast

Generic Homelessness Service

Introduction

All programs provided by the ac.care, Limestone Coast Generic Homelessness Service have a sound grounding in the latest national and international research. This ensures evidence based practice informs the programs provided to the various individual and family participants. The rationale for providing evidence based support initiatives is evident in the discussion below.

Theoretical Basis for Program Model

Literature review

In this section, a thorough review of the literature was undertaken, and in order to minimise repetition, only new theories, models, and programs of effective homelessness service delivery are presented here. Therefore, any literature and theoretical basis for the programs discussed in previous sections will not be repeated here but taken as a given, for example, the 'supportive housing' section discussed previously. The staff conducting the programs outlined the theoretical basis and evidence-based practice which informed the development and the implementation of the ac.care Limestone Coast Generic Homelessness Service programs. The literature review for the ac.care Limestone Coast Homelessness Service programs was conducted using the following literature data bases: Google Scholar, CINAHL, PubMed and PsycINFO. The three main theoretical premises for the ac.care Limestone Coast Generic Homelessness Service programs are: not only housing first, family centred and using community hubs, to support vulnerable populations are discussed below.

Not only housing first

There is an expanding evidence base advocating the use of supported housing service as paramount in addressing the multiple and complex needs of persons finding themselves living in homelessness (Baldry et al 2012, Parry et al 2016, Tsemberis et al 2012). Tsemberis et al (2012) found that successful and long term housing placement requires wrap around support and treatment services targeting the most complex needs of this population group. The holistic housing programs researched have been successful in decreasing the use of psychiatric services, alcohol use, and demand for intensive support services (Tsemberis et al 2012). Thus permanently supported housing services are more cost effective in the longer term (Tsemberis et al 2012). Additionally, there are substantial cost savings for governments in addressing homelessness swiftly and comprehensively (Baldry et al 2012, Tsemberis et al 2012).

Research by Baldry et al (2012) found the costs of unaddressed homelessness in Australia equated to \$2.2 million per person. Baldry et al (2012) study

highlighted the importance of early childhood interventions in individual and family homelessness that resulted in substantial decreases and prevention of the human and social costs of homelessness.

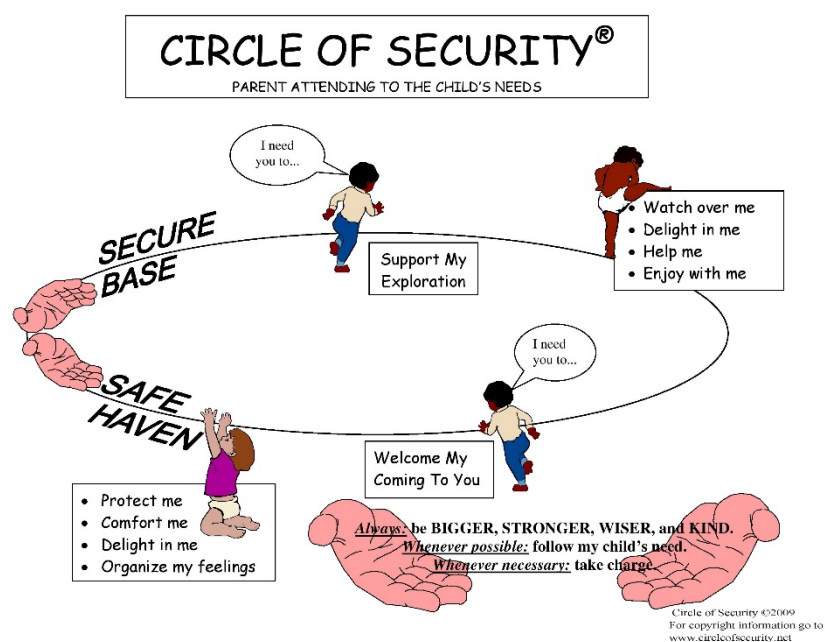
The supportive and extensive homelessness programs offered through ac.care Limestone Coast Generic Homelessness Service directly address manifestations of interrupted attachment that subsequently decrease levels of vulnerability for children. Working with parents and children using evidenced-based parenting and child in supported play groups and crèche assists in the development of new positive relationships that have lifelong impacts for the children and their families' (Centre for Parenting Research 2006, van Ijzendoorn 1995, van Ijzendoorn et al 1999). Consequently, the organised programs delivered by the ac.care Limestone Coast Generic Homelessness Service aim to ensure: collaborative, inter-disciplinary, and professional programs that provide an environment that supply consistency, professional supervision, personal support, and commitment to the development of productive, positive and therapeutic relationships with the parents, caregivers and children using the programs. These foundational programs are based on models of care such as, circle of security, case management and community engagement. The literature explaining these models is described below.

Referrals to parenting support, such as 'Circle of security' programs

Governments across Australia recognise the need to ensure that all homelessness services in Australia use a form of attachment/circle of security' foundation for addressing the needs of children and families who are homeless (Government of South Australia 2013, SHASP 2012, NSW Dept. of Family and Community 2012). In response to government mandates ac.care Limestone Coast Generic Homelessness Service aims to provide program referrals to parents to programs that include the circle of security as a theoretical basis for evidence based practice and uses the practical activities provided by the circle of security training. The circle of security is an internationally based early intervention program based on attachment theory and relationship theory (Dolby 2007, Dykas and Cassidy 2001, Havinghurst et al 2009). Referrals to programs using the circle of security theory are based on parenting that

champions the importance of secure attachment and relationships for early child development (Dolby 2007, Dykas and Cassidy 2001, Havinghurst et al 2009). Acknowledging that child development is ongoing, not linear and dependent on quality caregiver relationships (Dolby 2007, Dykas and Cassidy 2001, Havinghurst et al 2009). The theory is based on international academic research which confirms the key role of the use of increased empathy towards children and childhood as well as developing enhanced attachment between parent and child (Dolby 2007, Dykas and Cassidy 2001, Havinghurst et al 2009). Addressing parenting is vital in circumventing the deleterious health and life course consequences of homelessness for children and parents (Parry et al 2016, Maher et al 2011, Noble-Carr 2007, Noble et al 2006).

Figure 3.1 The circle of security: attending to children's need



Homelessness is a time of great developmental vulnerability for children (Parry et al 2016, Maher et al 2011, Noble-Carr 2007, Noble et al 2006). The programs structure illustrated in figure 3.1 above provide the main theoretical basis in the referral services used by ac.care Mt Gambier and this referral process and strategy has been successful in supporting the homeless parents using the homelessness service.

Addressing domestic violence and keeping children safe in homelessness

All homelessness organisations have obligations for child protection and child centred practice (South Australian Government 2012, SHASP 2012). ac.care Limestone Coast Generic Homelessness Service staff deliver flexible programs that address community needs in a manner that is culturally appropriate. Domestic violence is the major cause of homelessness for women and children (Homelessness Australia 2013, Tually et al 2008, AIHW 2016) therefore, ac.care Limestone Coast Generic Homelessness Service programs facilitate the staff to provide domestic violence counselling to all families. This includes specialist materials that specifically address domestic violence in cultural sensitive ways. Aboriginal and Torres Strait Islander peoples represent a higher proportion of homeless individuals and families therefore cultural appropriateness is imperative when providing support. The focus of the ac.care Limestone Coast Generic Homelessness Service domestic violence intervention is to keep the children and people experiencing violence safe.

Therapeutic Models of Care

Models of service delivery (applying the theories)

The ac.care Limestone Coast Generic Homelessness Service programs use several models of service delivery. All families attending the ac.care Limestone Coast Generic Homelessness Service programs can access the variety of programs designed to enhance peoples pathway out of homelessness.

Employment support services and referrals

ac.care Limestone Coast Generic Homelessness Service staff deliver flexible programs and referrals that are well supported by communities and business locally. The local business owners provide various support services that address a vast variety of needs that require addressing in order to advance a homeless person through homelessness and into work and connection with society. One such program links unemployed homeless people to services and programs that are designed to improve the skills of the homeless. The skills

such as intervening provide the homeless clients with the ability to address behaviours to improve performance at an interview.

The initial engagement with an ac.care Limestone Coast Generic Homelessness Service staff member provides an assessment process. The assessment is followed by the use of goal development and management case work model. The goal focused programs use evidenced-based theories that develop connections and pathway to services that promote learning strategies in children and adults, support and identify the assistance that is needed for the individual or family to connect and build a stronger community. This is achieved using the following activities:

- Case management
- Home visiting
- Family support and parenting
- Financial counselling and management skills
- Tenancy Education program (TED) delivers a variety of skills that enhances the pathways out of homelessness and includes:
 - Interviewing skills to enable homeless people to obtain jobs
 - Self-esteem building interventions (makeovers)
 - Clothing vouchers to improve self esteem
 - Job readiness to improve job prospects
 - Hair trim and makeover for females and males
- Skills for house hygiene
 - Program for house clean-up to assist with tenancy requirements
 - Weekly cleaning support through self-training and organisation
- Mental health support and referrals
- Drop in centre to
 - Address crisis needs
 - Address community inclusion needs
 - Improve connectedness to others
- Family play sessions
- Feedback on goal completion
 - This is a two-way process from

- Clients to staff and
 - E.g. client's feedback to staff if services promised are not supplied
- Staff to clients
 - Staff feedback to clients if the clients are not fulfilling their goals

These activities are based on the theories outlined above and as such provide significant changes and improvements in: maintaining housing tenancy, employment prospects and job readiness, parenting capacity, children's behaviour and community engagement and participation. This provides services that are holistic and meet the needs of the ac.care Limestone CoastGeneric Homelessness Service program participants.

Case management principles

All homelessness services use the principles of case management specifically designed for homelessness services (Government of South Australia 2013, SHASP 2012, NSW Dept. of Family and Community 2012). The main aims of the services are to provide a case manager who takes responsibility for coordinating various forms of support to achieve the objectives of the case plan. Through a strong client relationship, the case manager and client develop a set of key goals, with the case manager becoming the key liaison between all services involved to assist the client in achieving the set goals (Government of South Australia 2013, SHASP 2012, NSW Dept. of Family and Community 2012). The principles supporting case management are presented below:

In summary, case management:

- responds individually to the client's specific needs and issues
- looks at the client in a holistic way; not just their issues
- occurs with the client so that they can participate
- builds a client's knowledge and skills to enhance self-care, self-determination and independence
- provides continuity of care
- gives access to a wide range of support services
- coordinates existing resources and introduces new resources
- builds on the client's support network and links them to the wider community and its resources
- recognises social and personal contributions to a problem
- assists clients to navigate complex service systems

- gives clients information they can use again in the future to access support
- helps to prevent homelessness (Government of South Australia 2013, SHASP 2012, NSW Dept. of Family and Community 2012).

The list above represents some of the aspects covered by the case management process. However, the case management procedures and aims guarantees it is responsive to client needs (Calgary Homeless Foundation 2011, Government of South Australia 2013, SHASP 2012, NSW Dept. of Family and Community 2012). The case management model used is based on the diagram below (figure 4.2). The model illustrated below is based on the theoretical models and foundational work of Bronfenbrenner as described earlier. These principles and models encapsulate the aims of the ac.care, Limestone Coast Generic Homelessness Service service programs and interventions.

Figure 4.2 Wrap around service principles of case management.

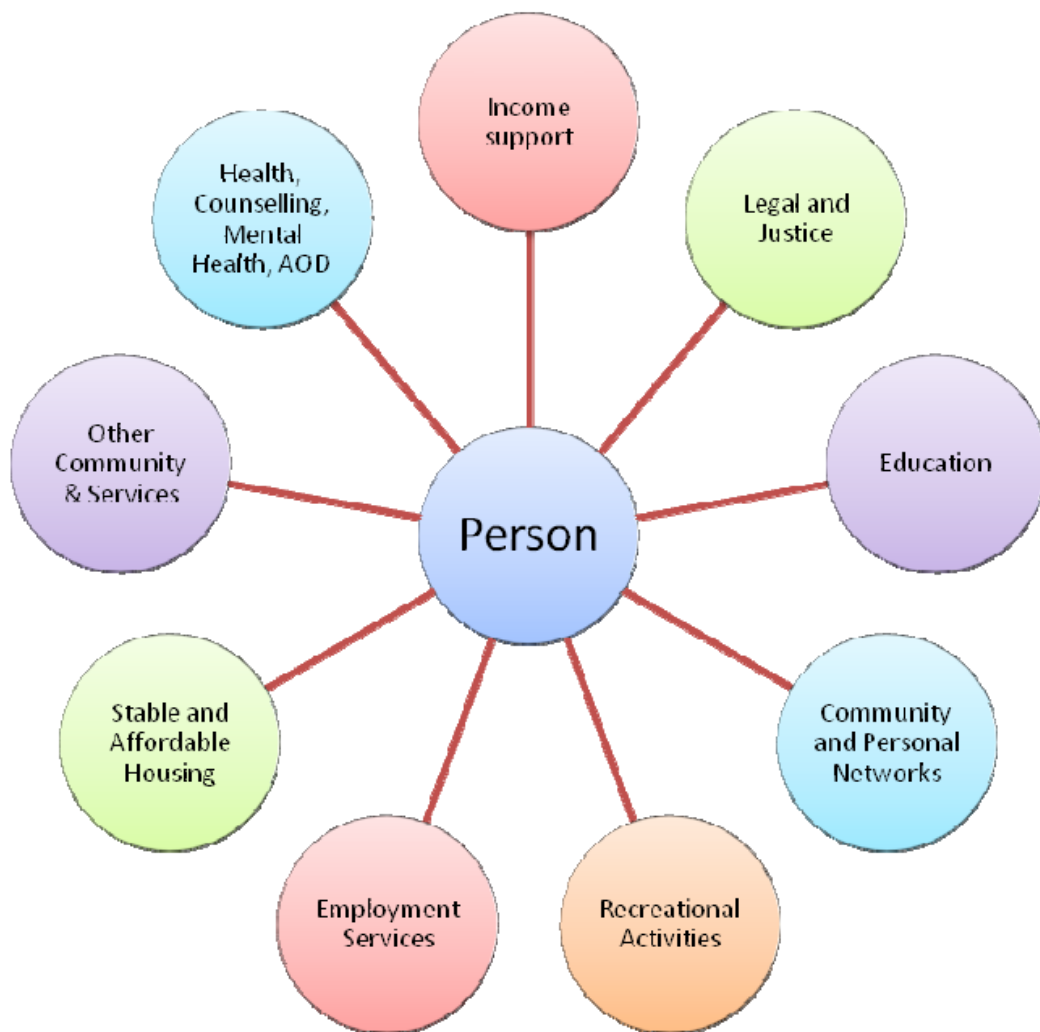


Diagram source: Page 24, NSW Department of Family and Community Services, 2012.

ac.care Limestone Coast Generic Homelessness Service service delivery aims to ensure that the person is the centre of the case management process and this connects homeless clients with the services they need to effectively transition out of homelessness (Calgary Homeless Foundation 2011, Government of South Australia 2013, SHASP 2012, NSW Dept. of Family and Community 2012).

Goal development and case management model

Research shows that case management works and can reduce homelessness between 97% and 100% when provided in a holistic and comprehensive way (Calgary Homeless Foundation 2011). ac.care Mt Gambier have developed

case management practices that include: collaboration and cooperation, the correct matching of services, ethical conduct, a coordinated and well managed system with continued professional and sector development. ac.care Limestone Coast Generic Homelessness Service staff deliver flexible, effective case management processes based on the recognition and enhancement of client focused goals. Goal development and case management is potentially one of the best interventions for a sustained end to homelessness (Calgary Homeless Foundation 2011).

The ac.care Limestone Coast Generic Homelessness Service deliver interventions that are validated and tested nationally and internationally (Calgary Homeless Foundation 2011, Government of South Australia 2013, SHASP 2012, NSW Dept. of Family and Community 2012), in accordance with government mandated guidelines, evidence-based models of effective support and intervention, and this has assisted in the delivery of reliable programs.

The main objective of the ac.care Limestone Coast Generic Homelessness Service case management and goal setting is to “enhance access to services required, improve the continuity and efficiency of services and maximise outcomes that build the client’s strengths and capacities. This approach depends on a systems coordination approach, i.e. effective coordination and collaboration across formal service systems and informal community supports” (page 24 NSW Department of Family and Community Services 2012), thus the underpinning case management and goal setting process is flexible enough to meet the individual’s, families’ and community’s needs. The goals provided targeted responses to the complex and multiple issues facing people living with homelessness. This requires staff who are qualified and provide an atmosphere of acceptance and support in the service.

Staff Qualifications

It should be noted that all staff engaged in providing the programs offered by the ac.care Limestone Coast Generic Homelessness Service programs have received training in each of the theoretical areas. Along with the practical

application of the theories into activities for children and parents. The structure of the programs provided are updated annually to ensure compliance with the latest research in the areas of attachment theory, circle of security and tuning in to kids. Further, the workers receive ongoing training in the theoretical and practical comments of their work.

The staff have tertiary qualifications and postgraduate qualifications in:

- Bachelor of Social Work
- Bachelor of Arts: Sociology and Politics
- Trauma Intervention and Support Practice
- Child focused Assessments
- Art Therapy and Sand Play
- Recognising and responding to Rape and Sexual Assault
- Mental Health First Aid
- Diploma of counselling
- Circle of Security training
- Diploma in child education
- Certificate in child development
- Leading Change in Homelessness
- Domestic violence training and past work experience
- Family and Child Sensitive Practice
- Hoarding and Squalor
- Kikstart training

ac.care provided training:

- Non-violent Crisis Intervention
- Program manager training
- Senior First Aid
- Bullying and Harassment
- AYFN Social and emotional well-being

All staff are trained in the direct delivery of the programs offered by ac.care Mt Gambier. The programs, such as the 'TED program' form the foundation of the holistic, wraparound service delivery model and processes. The ac.care

Limestone Coast Generic Homelessness Service staff are trained to deliver the TED program as well as having the necessary foundational education to assess clients and refer the clients to the appropriate service. The staff mix of skills and education described above provides an interdisciplinary approach to the needs of homeless clients.



Homelessness Prevention Week

3/8/15 to the 9/8/15

FREE SAUSAGE SIZZLE



Location: Rowe Reserve (near ac.care)
7 Wilson Street, Berri
Date: Thursday 6th August, 2015
Time: 10.30am to 1.30pm
Information will be available about what services are in your region.
*****All Welcome*****



Section four:

Findings and results

General background demographic data

The first part of section four provides an overview of some of the baseline demographic information from the final year July 2015 to June 2016. The information provided below constitutes part of the information provided to the homeless 2 home reporting data.

Figure 4.1 below provides an overview of the percentage of people using the service from July 2015 to June 2016 and their broad identity and citizenship status. Therefore, of the 475 who were assisted by ac.care Limestone Coast, Generic Homelessness Service, 65 (14%) people were Aboriginal and/or

Torres Strait Islander, 395 where non-ATSI people, and 15 (3%) did not provide that information.

Figure 4.1 Identity and Citizenship Status

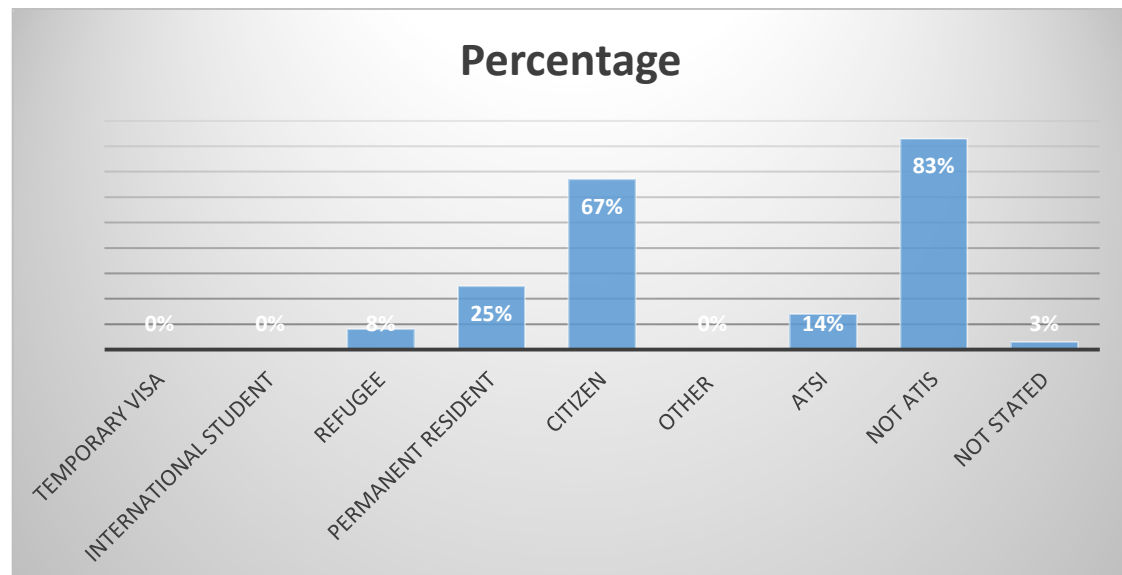


Figure 4.1 identifies the people accessing the services by their citizenship status. Recognising the presence of people born overseas, for example, 8% of people accessing the service were refugees, 25% permanent residents and 67% were citizens is important as for example, refugee status can bring with it other complexities along with the homelessness. The recognition of this diversity highlights that the provision of services to a diversity range of cultural and ethnic backgrounds is identified by ac.care Mt Gambier.

The figure 4.2 below illustrates the ages of people attending the ac.care Limestone Coast Generic Homelessness Service. Highlighting the broad range of ages and the needs for staff to provide flexible and age appropriate interventions and support.

Figure 4.2 Age groups of people attending ac.care Mt Gambier.

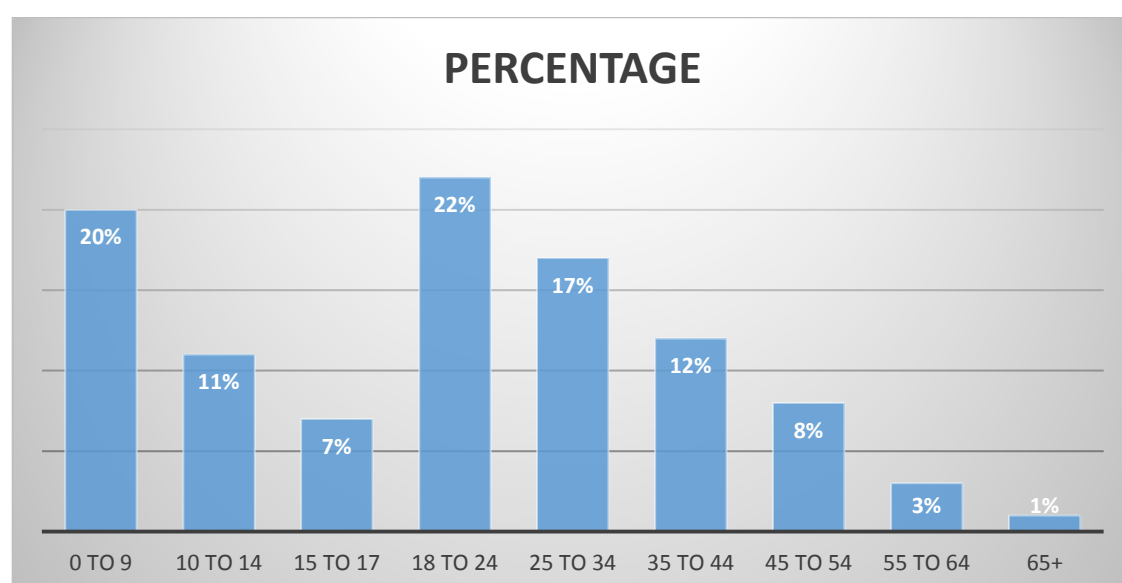
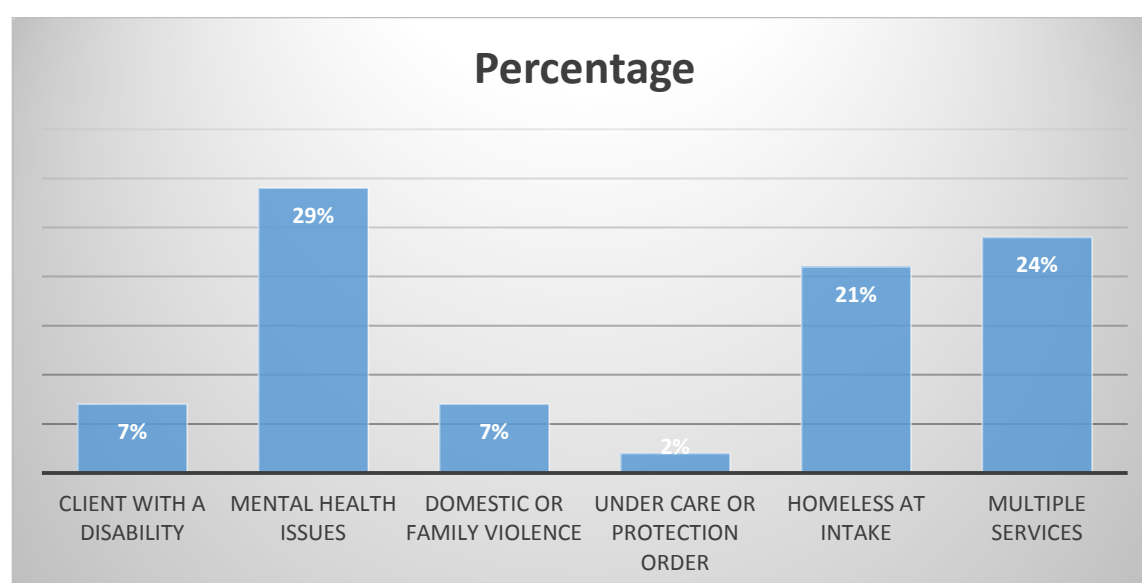


Figure 4.2 above illustrates the diversity of age group and lifespan intricacies facing the people using the ac.care Limestone Coast Generic Homelessness Service. This exemplifies the importance of the use of theoretical frameworks that identify the varying needs of people during different stages of the lifespan.

The ac.care Limestone Coast Generic Homelessness Service also provides services to people experiencing a variety of life changing issues. These issues include disability, mental health, domestic and family violence, children and young people in the care of the ministers with 'under care or protection orders' and those clients with multiple and complex issues who are supported by multiple agencies.

Figure 4.3 Disability and other homelessness comorbidities



The ac.care Limestone Coast Generic Homelessness Service provides services for people with disabilities, mental health issues etc. Of the 475 people receiving a service at ac.care, Limestone Coast Generic Homelessness Service 416 present with the issues shown in Figure 4.3.

Figure 4.3 illustrates that the majority of people attending the ac.care Mt Gambier, Limestone Coast, Southern Country Generic Homelessness Service have other issues e.g. mental health issues (29%), use multiple services (24%), are homeless (21%), are disabled, escaping domestic or family violence (7%) or are children and young people under a care or protection order (2%).

As a generic service this necessitates that the staff, programs, and services, address the many complex issues that accompany someone accessing the Limestone Coast Generic Homelessness Service. The variety of comorbidities described by this cohort of people is outlined in Figure 4.3 above. Additionally, the staff also need to work in an interdisciplinary manner in order to address the complexities and comorbidities of the people attending ac.care Limestone Coast Generic Homelessness Service.

The information provided in figures 4.1, 4.2 and 4.3 demonstrate the diversity and complexities of the clients using the ac.care Mt Gambier, Limestone Coast

Generic Homelessness Service during the June 2015 to July 2016 period. This data is representative of the yearly data collected by ac.care Limestone Coast Generic Homelessness Service.

Research methods for the evaluation of the ac.care Mt Gambier, Limestone Coast, Southern Country Generic Homelessness Service Programs

Stage one of the evaluation of the ac.care Limestone Coast Generic Homelessness Service programs consisted of a literature review of the theories, philosophies, and service delivery models, used to determine the evidence base for the characteristics of the intervention programs involved. Stage Two included interviews with providers (community members, and managers and staff of ac.care) and the former clients and clients of the ac.care homelessness service. The collected qualitative data was analysed thematically to provide in-depth understandings of the impact of these programs on the families. These two stages together provided a broader and deeper understanding of the effectiveness of the ac.care Limestone Coast Generic Homelessness Service program and referral initiatives provided by the ac.care Limestone Coast Generic Homelessness Service.

The intensive support provided by ac.care Limestone Coast Generic Homelessness Service programs, assists individuals, and families to deal with the isolation experienced through homelessness. The ac.care Limestone Coast Generic Homelessness Service programs use proactive, targeted, and inclusive community based interventions focused on community inclusion and involvement. Isolation can negatively influence the mental and physical health of individual, and families by directly impacting on access to services. Therefore, the use of qualitative research processes is recommended with isolated population groups (Foster et al 2015).

Research process

The research processes have remained consistent for all the qualitative data collection throughout this research project. The initial research processes, such

as inclusion and exclusion criteria, data analysis, participant inclusion etc. have been outlined in the introduction. The theoretical base and application processes embedded within the services and programs provides a robust practice consistent with the theoretical underpinnings. The information provided by the key informants adds to the validity and robustness of the findings on the services and programs delivered.

Findings

General participant and research data collection information

The methods used in the data collection inform the analysis used in the evaluation. Table 4.1 illustrates the types of participants involved in each stage and step of data collection. The table 4.1 also highlights the method of data collection required for each participant type. The basis for recruitment outlines the role of the participants and implies their level of involvement in the ac.care Limestone Coast Generic Homelessness Service programs.

Table 4.1: the type of participants and method of data collection used

Participant Type	Numbers	Basis for Recruitment	Component of Research Involved (e.g. survey, interview, focus group, observations)
Managers and staff	6	Responsible for: the assessment of clients; case management; goal setting with clients; delivery of some programs, and the referral of clients to other support programs.	Face-to-face and phone interviews and the supply of observational information (on behavioural changes in fathers, mothers and children).
Clients of the ac.care Mt Gambier Homelessness Service	15	Clients who had received a service from Mt Gambier Homelessness Service.	Phone interviews.
Referral service providers e.g. businesses	5	Services that provide a program of intervention for the clients of Mt Gambier Homelessness service.	Phone interviews.
Total	26		

Table 4.1 above provides an explanation for the type of data collected and the level of involvement of the participants. For example, there were five owners of local businesses or managers of external community based services who

volunteered to participate in an interview. The information collected outlines the intensive support provided by the ac.care Limestone Coast Generic Homelessness Service assisting individuals, families and their children to deal with social and cultural isolation that accompanies homelessness. The ac.care Limestone Coast Generic Homelessness Service programs use case management and goal based proactive, targeted and inclusive community based methods of service and program delivery. The results of this research illustrate the importance of this program.

Findings qualitative themes

There were a number of main themes found within the data. The interviews with key informants continued until data saturation occurred. The themes discussed below represent the central themes. In order to maintain confidentiality and anonymity there has been no designation of participants in the theme sections. This will circumvent any attempts to identify the participants responding to the open-ended questions given the rural nature of the cohort involved. There were no differences between the comments made by community members, managers, staff, and clients.

Theme 1: Well supported programs developing life skills

The views presented in this theme have been derived from all participants. That is the community members, staff, managers and client's views are acknowledged here. The participants discussed the lack of 'life skills' of the clients using the ac.care Limestone Coast Generic Homelessness Service programs. The staff, community members and clients all noted the 'major' impact of the 'life skills' programs, such as TED, had in effectively transitioning the clients out of homelessness and into jobs, private rental and better lives. There were positive comments about the comprehensive nature of the individual support, family support and engagement with the local community and business in order to support people living in homelessness. The quotations below reflect the responses to participating (as staff, or client) in the ac.care Limestone Coast Generic Homelessness Service programs:

The support provided by the case managers, assist the individuals, and families to develop 'life skills'. No one has shown them how to do things...they've not had good role models in the past...no idea how to do housework, plan a menu, budget...we walk alongside them to show and help them (S).

We listen and find out what issues got them into homelessness and directly address those...mental health, family breakdown...whatever they need (S).

We provide a wraparound service [see supported housing principles above] ...that's why it works we are there to assist only...we have a drop in service too, so when they are in crisis they are able to get support before the issues get too out of hand...they feel connected (S).

I was really struggling, I lost my job and then everything went downhill...the program was great...I got a job and it helped with budgeting. We are doing better as a family it helped connected us back with the community too. We know we can talk to [our case manager] if there are problems its good to know they care and are here to help (C).

The ac.care Limestone Coast Generic Homelessness Service programs delivery modes reflect the holistic and wraparound nature of the individualised service delivery. The nature of the service provision aids the clients in feeling 'connected' and 'valued' by the service and the broader community. The development of 'life skills' also provided the client with the fundamental skills required in order to maintain a future tenancy and job. The foundational philosophy and models of service delivery are supported by the research and as such as evidence based.

Additionally, the ac.care Limestone Coast Generic Homelessness Service programs support the clients in becoming connected to the community. This addresses the isolation and disenfranchisement that occurs with homelessness. The skills provided by the service and programs also enhances the connections to community through referrals and business connections. The referral and business organisation enhance the services and programs provided by ac.care and build the skills needed by homeless individuals and

families to participate in the community. This theme is illustrated in the quotations below.

Theme 2: Connecting the individual and families to community

The staff, businesses and clients interviewed for the ac.care Limestone Coast Generic Homelessness Service programs evaluation explained at length the importance of connecting homeless individuals and families to the community. The skills and referrals provided to clients augment the client's ability to reconnect in meaningful ways that assist them in returning to work and participating positively in with significant others. This is captured in the quotation below:

We had this young guy with a cognitive impairment...no one had given him services before...now we have him connected, he's doing really well...he has a job and private rental...he still pops in when he needs a little help and this stops him falling back into homelessness. We encourage him to get other support as well so he doesn't fall back again (S).

If they've got children. we help registering the children at kindy, and school (S).

A lot [clients] have mental health issues. We help connect them to mental health services(S).

I know things were really bad...I was in a bad way I had all this mental health stuff...I never knew I had it...I was homeless and ended up here in Mt Gambier. Even though I wasn't local they helped me...for the first time I felt connected and they got me help with my issues. Now I go to the doctor and get help...I have a job they have turned my life around (C).

The programs use a range of professionals, businesses, and local services to provide inter-disciplinary, and holistic, individual and family interventions. These types of evidence based initiatives are important as it connects the programs with the isolated individuals and families, and supports the clients to reconnect and integrate into the mainstream systems. The use of connections and holistic practices is also reflected in the team based approach to service delivery. The

service has a team based approach to dealing with individuals and families therefore the model of service delivery also provides inter-disciplinary interventions for each individual and family. As highlighted in the theme below.

Theme 3: Team based approach

The services and programs delivered by ac.care Mt Gambier, Limestone Coast, Southern Country Generic Homelessness Service, for individuals and families at risk of homelessness use a team based approach for the goals and interventions provided by the service and this is captured in the quotation below:

So if I don't know the answers or how to help with their issues I'll go back to the team and we talk it over (S).

I know they try really hard to help and if [case worker] doesn't know then she goes back and asks...they all work together. That feels better to me I know they all care (C).

The quotes above links to the use of team based case management highlighted in the literature in previous sections above and in the following theme. The use of specific case management is recommended in the homelessness sector nationally and internationally. Further outlining the importance of using professional staff, attending ongoing education, and using evidence based frameworks of intervention. As highlighted in the theme below.

Theme 4: Case management

The use of case management practises for goal setting and addressing the multiple, complex needs associated with homelessness outlined in the literature were also discussed at length by the staff and managers interviewed. Case management formed a foundational practice for the service and ensured the goals and interventions provided were supported by innovative services and referrals that met the client's needs. As captured by the quotation below:

We do an initial intake and assessment process. Then we meet with the client to get an idea of what they need and then we set goals with them. They [clients] lead what they need we walk beside them so to speak. We help them to manage their issues...we use a case management approach and it works really well. We provide a Tenancy Education

program we call it TED. We support them in the future so we can address the issues before they become homeless again (S).

My case worker helped me, we discussed what I needed, and then she helped me to get it...sometimes it was the little things, like taking me to an appointment, and helping me get on track, that's what helped the most. I got more confidence...being homeless makes you scared of everything, you lack confidence (C).

The quotation above highlights the use of extensive evidence regarding case management and supportive housing framework used to ensure the programs provided by ac.care Limestone Coast Generic Homelessness Service programs which are evidence based and provided the outcomes measured. The setting by case managers is used to supply a holistic set of interventions with measureable and achievable outcomes. The case manager and client work together to set the goals and interventions required and these goals are tracked during the first intensive period of the service's intervention program. Additionally, by working closely with clients the frameworks and models of interventions provided, supports and effectively addresses some of issues that preceded the experience of homelessness, such as domestic violence. As discussed in the comments below.

Theme 5: Domestic violence

There are a wide variety of causes of homelessness experienced by the clients using ac.care Limestone Coast Generic Homelessness Service programs. As highlighted earlier mental health issues are prevalent among a large number of the clients using the service. Of note are the number of women and children escaping domestic violence. Domestic violence impacts on families regardless of socioeconomic status and this is portrayed in the comments below.

Family breakdown is a large cause of the homelessness we see. Its happening in the middleclass as well...it's the pressure on families...then DV and homelessness...homelessness is all across the board as is DV (S).

My case worker helped us as a family...the debt, the bills, we were made casual. I understood that the pressure made things worse for him

[husband]...we ended up homeless but then he got help...we all got help...we know how to manage now (C).

The quotation above highlights the pressures on families can cause previous coping mechanisms to fail. The service has a broad referral network and links all the family members into the services they require to address complex issues such as domestic violence. The case work, and holistic, whole of family approach is also supported by the local community and businesses.

Theme 6: Links to local businesses and community

There are strong links between the ac.care Limestone Coast Generic Homelessness Service programs to local businesses and community heightened by community functions that engage with the local rural community. The local businesses provide 'makeovers' and other opportunities such as apprenticeships, work experience, and gifts, for example clothing, furniture and white goods. The inclusions of the local businesses have also been incorporated into the TED intervention program and these unique aspects of the ac.care Limestone Coast Generic Homelessness Service programs are captured below.

The local businesses here are really great, really supportive of our program, they see a real difference...one offered an apprenticeship program and he was so impressed with the apprentice that he then offered a car to be donated to a homeless family. We had to nominate a family or person we thought where the car would make a difference and it did, it made a real difference now the mum and dad both have jobs. It has made an enormous difference to their lives, their family. It also helped others too, who were homeless, to know businesses cared, and cared about them too (S).

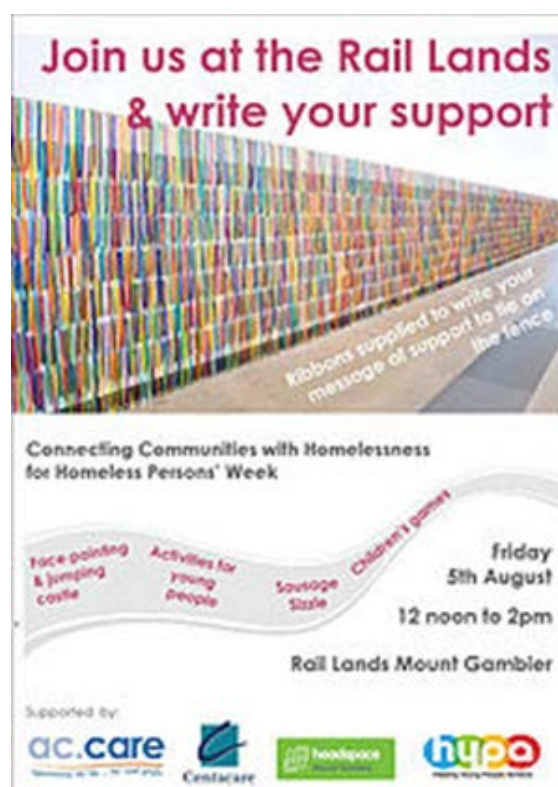
While I was using the homeless service this family they won a car it was fantastic you could see the whole town cares. It made me feel there was hope for me too. They helped me so much I had a makeover, you know, hair, make up, nails. I felt like people cared about me and I started caring about me. They helped with job interview skills. They really want you to do well. I have a job now and I'm on medication and I know if I need to

pop in for a chat they will listen and if I have an issue they will help me. The service is really important not just to the homeless but the whole community. It's about people. Not just do this program but it cares about people (C).

The quotation above highlights the use of extensive interventions which connects the clients, businesses, and community to effectively engage and change outcomes for individuals and families experiencing homelessness. The discussions in section five below compares the literature review with the outcomes of the thematic analysis.

Limitations

The research has limitations as the results from the interviews with businesses, staff, management and clients is by no means extensive but limited to those interviewed. The occurrence of saturation with the data themes provides some robustness to the findings. The similar conclusion to the findings here with the literature also helps to support the conclusions of this research.





Section five:

Discussion and conclusion ac.care Limestone

Coast Generic Homelessness Service

This section of the evaluation will focus on the ac.care Limestone Coast Generic Homelessness Service findings and the literature. There were a number of main themes found within the data. The interviews provided data saturation on the main themes. Subthemes are not discussed here. The themes in the data analysis are also consistent with the themes in the literature that provide the philosophical, theoretical bases and the models of care used in the goal setting and interventions provided to individuals and homeless families. This provides an internal validity for the themes, and research robustness, for the research design and processes used.

Discussion

There were a number of main themes found within the data that are consistent with the themes found in the literature. The use of the philosophies, theories and models of intervention are consistent with the latest interventions and recommendations used in the homelessness sector. Further, these findings are consistent with the broader approach to service delivery in the ac.care Limestone Coast Generic Homelessness Service initiative, such as the benefit of the programs to intervene, and provide support. With the local businesses, staff, individuals and families noting that without the service and its interventions, the outcomes for themselves, and their children, would be limited, and often negative. The importance of providing programs that are targeted and intervene early in the life of the problem supports the economic assertions made in the literature review section of this report.

Further, the changes evident in the client's behaviour support the use of theoretical bases for the program interventions and models used. These models and intervention practices are well researched, and established as best practice. Therefore, the use of collaborative goal setting, inter-disciplinary and multi-faceted interventions provides case based measurable outcomes for the individuals and families using the ac.care Limestone Coast Generic Homelessness Service.

Linking the aims of the ac.care Limestone Coast Generic Homelessness Service to service delivery

The ac.care Limestone Coast Generic Homelessness Service successfully links its aims of providing a wraparound, holistic homeless intervention program to the delivery of unique programs that actively address the multiple and complex disadvantages that coexist with homelessness people in their care. Although this is in keeping with the latest evidence-based practices in other OECD countries the adherence to the latest evidence-based practice for the provision of care well beyond the provision of housing is often beyond the current service delivery for Australian homelessness services. Australian services are traditionally underfunded and rely solely on the provision of funds from governments resulting in the provision of services that may not address all

the needs of people living in housing crisis, or homelessness. The literature and research results clearly outline the benefits of the service in addressing the complex needs of people living in housing crisis, or homelessness. Additionally, the ac.care Limestone Coast Generic Homelessness Service is actively supported by the commercial housing providers, such as the private rental providers. This is another unique aspect of this service as evident in the results section of this report. The business sector provides the ac.care Limestone Coast Generic Homelessness Service with houses knowing that the service provides extensive support that promotes the successful transition of the homeless clients to clients capable of meeting the life skills necessary to maintain their housing needs. The uniqueness of the wraparound, holistic ac.care Limestone Coast Generic Homelessness Service program is explored below.

The uniqueness of the ac.care Limestone Coast Generic Homelessness Service

The ac.care Limestone Coast Generic Homelessness Service effectively addresses the multiple comorbidities and complexities of homelessness via several unique characteristics that have evolved through close collaboration with others services and the local business community. The ac.care Limestone Coast Generic Homelessness Service is unique within the homelessness sector in several ways:

- Connections to community
- Fund raising activities
- Support of local community

Each of these distinct areas of collaboration and local business involvement are outlined and explored in the section below.

Connections to community of the ac.care Limestone Coast Generic Homelessness Service

The ac.care Limestone Coast Generic Homelessness Service has developed close connections to its local rural community over several years. These

connections are evident in the newspaper clippings that are distributed throughout this report and in the thematic analysis of the interviews. For example, the people attending the homelessness services receive an initial assessment and participate in a life skills program that seeks to deliberately address the complex and multiple issues that may have created the homelessness. The provision of a holistic view of homelessness allows the homeless clients to be connected to other programs, such as literacy, job skills, training, apprenticeship programs, and employment. All these activities are fully supported by the local community. The businesses and services provide the homeless clients with connections to community which are often missing in isolated and displaced people and families who then become homeless.

Thus the connections to community are two fold as the ac.care Limestone Coast Generic Homelessness Service is intrinsically connected to tis local community, and the local community aids its clients in being connected to community.

Fund raising activities of the ac.care Limestone Coast Generic

Homelessness Service

The ac.care Limestone Coast Generic Homelessness Service also is unique in that it is fully supported within its community through fund raising activities. These activities occur through liaisons with local businesses and philanthropic benefactors as described in the newspaper clips and interviews. For example, the local business donates goods and services along with the fund-raising activities. Several clients and staff spoke of the provision of a car for a family that had made a profound impact on the family by enabling the family to obtain employment, feel connected, and supported by a community. The feelings of connection and support by the gift of a car was immense not only for the family but also for the other clients. One client stated, 'this family got this car, and it was fantastic you know everyone here cares, they care you are homeless, and that makes you try harder to get out of it'.

The fund raising activities have also enabled the ac.care Limestone Coast Generic Homelessness Service to purchase some of its own housing stock providing the service with some housing stock. The fundraising activities are embraced by the local community and there is a sense of community pride in being able to help others. For example, one business owner stated, 'we get together and organised a BBQ for the service...we have raised thousands, and now they have a house for the most needy...it feels good to help others. Our community is very proud of the support we provide to these families'.

Support of the local community for the ac.care Limestone Coast Generic Homelessness Service

The ac.care Limestone Coast Generic Homelessness Service is supported by the local business to provide an increase sense of self-worth for its clients. For example, one local business owner stated, 'we provide make-overs, you know hair, nails etc. for the men and women. It can break your heart as some they say, they have never been to a hairdresser, had a bread trim...they leave with their heads held high. You then see them later and they have work. They come back and thank you'. This level of support and engagement by the local business and community with the ac.care Limestone Coast Generic Homelessness Service is unique among homelessness services and is one of the key aspects of its success. The inclusion and promotion of the clients as people using the ac.care Limestone Coast Generic Homelessness Service, by the service, and the local community, assists the homeless population in reentering community and decreasing the alienation and isolation often felt by homeless people.

Conclusion

The ac.care Limestone Coast Generic Homelessness Service is well supported by the local community. Additionally, the staff are educated and committed to providing an exemplary service to those experiencing homelessness. The clients benefit from the services which are soundly founded in the philosophical, theoretical, and model based interventions that underpin the referrals, services, and supports provided. The success of the ac.care Limestone Coast Generic

Homelessness Service is its theoretically substantiated and evidence- based programs that have been enhanced by the delivery of staff who are well connected with the community.

Further, homelessness as a social determinants of health (SDH) is a multi-causal consequence and has lifespan ramifications. The theoretical basis of the programs provided and the use of evidence-based interventions based on world renown and well formulate interventions is also paramount to the success of the program evaluated in this report. The professional staff are trained in the programs offered. Thus using a multimodal pathway out of homelessness is consistent with the philosophical, theoretical, and evidence based models underpinning this service. Therefore, the ac.care Limestone Coast Generic Homelessness Service programs respond at multiple levels to the risks and issues facing individual and families experiencing homelessness by providing interprofessional, and multidisciplinary responses, that require higher level case management, individual and family therapeutic interventions, and strategic and well developed referral networks and collaborations.

The ac.care Limestone Coast Generic Homelessness Service provides the physical setting and community based environment for many of the programs offered and seem to be an integral part of the program's success. The staff of ac.care Limestone Coast Generic Homelessness Service offer a welcoming and accepting atmosphere. They also offer extended support services and a liaison hub for families dealing with homelessness, and social isolation.

The methods used to collect the data have informed and enhanced the use of different types of analysis. This process has further validated the results and provided evidence that is substantiated and corroborated from many sources. The similarities in the themes, is consistent across all the key stakeholders interviewed regardless of their designation or position. This is testament to the use of theoretically based, and evidence based interventions, and methods of working with homeless individuals and families. Additionally, the use of multiple informants and key stakeholders has provided a circular process that ensures triangulation and robustness of all data collection and the research process.

A note of caution is needed however, as the economic, social, and policy changes will impact on the community and families of this area. There will be a consequence for the area and the families if there is a lessening of these interventions and programs. Additionally, changes to the programs could diminish some positive outcomes for individuals and families provided by these programs. Further research and the development of robust measures of change are required to improve the collection of quantitative data in some of the programs provided by ac.care Limestone Coast Generic Homelessness Service.

Recommendations

The following recommendations are in accordance with the guidelines from the ac.care Limestone Coast Generic Homelessness Service programs, website and organisational outcomes:

- The ongoing feedback process for the individuals and families using the service.
- Continued training of staff for all referrals/programs used by the clients to ensure the staff understand some of the basic knowledge on the interventions and therapy being provided by other services.
- Continue to enable replication of the all programs provided to assist in the dissemination of proven programs.
- Establish an ongoing collection of the quantitative data for analysis



KEY SUPPORTERS: *The Border Watch* general manager Robin Reid, business leader Barry Maney OAM, ac.care's Anne Hinkly-Tyler and Barry Maney Group's Barry Stafford rally together to promote the upcoming Support Homeless People bi-annual luncheon, which will be held at The Barn in April.

Picture: SANDRA MORELLO.

Businesses unite

Homelessness in sights of major event

It's Good News!

There are no more stairs for clients of Kevin and Donna at

Dream charity event result

Business leaders dig deep to support homelessness appeal



SANDRA MORELLO
sandra@tbw.com.au

"WE dared to dream" was the sentiment of prominent Mount Gambier businessman and philanthropist Barry Maney OAM as the fundraising tally nudged \$75,000 at last Friday's key homelessness luncheon.

In one of the most successful one-day fundraising events ever held in Mount Gambier, the luncheon raised more than double accrued at the inaugural event just two years ago.

The region's business community rallied behind the Support Homeless People campaign that raised funding for homelessness services provider ac.care.

"We dared to dream and raise in the 50s, but to raise what we have would have to be one of the largest amounts ever raised in Mount Gambier," a delighted Mr Maney said at the event.

With the function being attended by some of the region's most prominent iden-



KEY SUPPORT: Member for Mount Gambier Troy Bell stands with Rob Mason, Peter Westley, Adrian de Bruin and Frank DiGiorgio at the homelessness fundraising event.

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Homelessness reality

Event addresses key South East issue



SANDRA MORELLO
sandra@borderwatch.com.au

REGIONAL homelessness services program manager Trish Spark says homelessness is a key issue in the Limestone Coast.

"Many people believe that homelessness is not an issue in our region because it is not in their face," Ms Spark said the Support Homeless People campaign launch in Mount Gambier last Friday.

Although the at care employee said residents did not see people sleeping in shop doorways or in the city's parks, she claimed homelessness was a reality.

Ms Spark said homelessness took many forms, including couch surfing.

"For young people and women with children, this can be very unsafe as they are vulnerable and easy targets," she revealed.

"They can be targets for violence, sexual abuse, drug dealers and so on."

She said others were living in caravan parks, boarding houses or emergency accommodation.

"This accommodation is generally short term and people have no place to call home and no security to ensure they won't be on the street in the near future," Ms Spark said.

She said another myth in the community was that those who were homeless, chose to be that way.

"Would you choose to choose



BIDDING FRENZY: Homelessness campaign co-organiser Barry Stafford holds up a 2005 bottle of Grange during the spirited auction. The boxed bottle sold for \$850.

Picture: SANDRA MORELLO